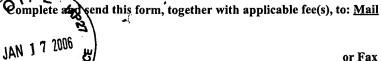
PART B - FEE(S) TRANSMITTAL



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(571) 273-2885 or <u>Fax</u>

his form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as INSTRUCTION

inflicación de la corrected below or directed otherwise in Block I, by (a) specifyin maniferation fee notifications.	g a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for
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SACCO & ASSOCIATES, PA P.O. BOX 30999 PALM BEACH GARDENS, FL 33420-0999 Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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(=-p-0.10.1)	Sacco	<u> </u>		
(Signature)	2			
(Date)	1-06	1-1		
CONFIRMATION NO.	ATTORNEY DOCKET NO.	FIRST NAMED INVENTOR	FILING DATE	APPLICATION NO.
5286	6785-126	Thomas P. Schmutz	12/27/2000	09/749 210

TITLE OF INVENTION: DISCRETE POWER LEVEL CODING FOR INDICATING UPLINK MOBILE RECEIVE LEVEL IN A WIRELESS REPEATER SYSTEM

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE]
nonprovisional	YES	\$700		\$300	\$1000 8006 NROCHA2 0000007	02/17/2006 1 09749210	_
EXAMINER ART UI LEE, JOHN J 2684		ART UN	IT	I CLASS-SUBCLASS			
			91 FC:P501 455-013400 02 FC:1504		700.00 OP 300.00 OP		
1: Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the na	nting on the patent front page, list		Associates,	P A ?	
		or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME ANI	RESIDENCE DATA TO B	E PRINTED ON T	HE PATEN	T (print or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Γa substitute	pear on the patent. If an assign for filing an assignment.	ee is identified below, the	document has been filed for	or
(A) NAME OF ASSIGN	IEE	(B) RESIDEN	CE: (CITY and STATE OR COU	JNTRY)		
	RNET COMMUNI				MELBOURNE,	•	
	e assignce category or catego				orporation or other private gr	roup entity Governmen	nt
4a. The following fee(s) are	enclosed:	· 4b	. Payment of	` '			
Issue Fee	,		_	in the amount of the fee(s) is en		•	
	small entity discount permitte	ed)	Payment	t by credit card. Form PTO-2038	is attached.		
Advance Order - # o	f Copies 3		The Dir Deposit Acc	ector is hereby authorized by cloount Number	narge the required fee(s), or (enclose an extra	r credit any overpayment, copy of this form).	to
5. Change in Entity Status	(from status indicated above	:)		·			_
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	☐ b. Appli	cant is no longer claiming SMAI	LL ENTITY status. See 37 (CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and F interest as shown by the rec	is requested to apply the Issu Publication Fee (if required) vords of the United States Pate	ue Fee and Publicate will not be accepted ent and Trademark	ion Fee (if a I from anyon Office.	ny) or to re-apply any previously e other than the applicant; a regi	y paid issue fee to the applic stered attorney or agent; or t	ation identified above. the assignee or other party	in
Authorized Signature	17	7		Date	1-11-06		_
Typed or printed name _	Robert J.	Sacco		Registration	No. 35,667		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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JAN 17 2006 JAN 17 2006 JAN 17 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

pplication No.

09/749,210 SCHMUTZ Confirmation No.

5286

Applicant

Filed: :

December 27, 2000

TC/A.U.

2684

Examiner

LEE, John J.

Docket No.

6785-0126

Customer No.

39207

TRANSMITTAL LETTER

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Sir:

Please find enclosed the following for filing:

- ✓ Form PTOL-85 Fee Transmittal
- ✓ Fee: \$1009
- ✓ Other: Postcard Receipt (1)
- ✓ Please charge any fee deficiencies or credit any overpayments to Deposit Account No. 50-2884.

Date: 1-11-06

Respectfully submitted,

Robert J. Sacco

Registration No. 35,667

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